

October 7, 2011

Montana Health Care Programs Notice

Physician, Mid-Level Practitioner, Family Planning Clinic, Public Health Clinic, FQHC, RHC, IHS, Outpatient Hospital, Ambulatory Surgical Center

Influenza Virus Vaccine

Effective January 1, 2011

Effective January 1, 2011, HCPCS established five new codes that are used to report influenza vaccines.

Q2035	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Afluria)
Q2036	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (FluLaval)
Q2037	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluvirin)
Q2038	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluzone)
Q2039	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Not Otherwise Specified)

These codes have now been added to the list of codes used to report vaccines received through Vaccines for Children (VFC), a program for clients ages 0–18.

The vaccines provided by VFC as of January 1, 2011 and after are:

Code	Description
90633	Hepatitis A vaccine, pediatric/adolescent dosage (2 dose schedule)
90645	Hemophilus influenza b vaccine (Hib), HbOC conjugate (4 dose schedule)
90647	Hemophilus influenza b vaccine (Hib), PRP-OMP conjugate (3 dose schedule)
90648	Hemophilus influenza b vaccine (Hib), PRP-T conjugate (4 dose schedule)

Code	Description
90649	Human papillomavirus (hpv) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use for both males and females (Guardisil)
90650	Human papillomavirus (hpv) bi-valent types 16 and 18 (Ceravix) 3 dose schedule for females, intramuscular
90655	Influenza virus vaccine, split virus, preservative free, for children 6–35 months
90656	Influenza virus vaccine, split virus, preservative free, for use in individuals 3 years and above, for intramuscular use
90657	Influenza virus vaccine, split virus, for children 6–35 months
90658	Influenza virus vaccine, split virus, for individuals 3 years and above
90660	Influenza virus vaccine, live, for intranasal use
90670	Pneumococcal conjugate vaccine, polyvalent (13 valent), for children under 5 years
90680	Rotavirus vaccine, pentavalent, 3 dose schedule, live for oral use (RotaTeq)
90681	Rotavirus vaccine, Human, attenuated, 2 dose schedule, live for oral use (Rotarix)
90696	Diphtheria, tetanus toxoids, acellular pertussis vaccine, and poliovirus vaccine, inactivated (DTap-IPV), children ages 4–6 years of age, (Kinrix)
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, haemophilus influenza type b, and poliovirus vaccine, inactivate, for children prior to fifth birthday, (Pentacel)
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), for individuals younger than 7 years
90707	Measles, mumps and rubella virus vaccine (MMR), live
90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use
90713	Poliovirus vaccine, inactivated (IPV)
90714	Tetanus and diphtheria toxoids (Td), preservative free, for individuals 7 years or older
90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), for use in individuals 7 years old or older, for intramuscular use.
90716	Varicella virus vaccine, live
90718	Tetanus and diphtheria toxoids (Td), for individuals 7 years or older

Code	Description
90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Hepatitis B, and poliovirus vaccine, inactivated (DTap-HepB-IPV)
90732	Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, for individuals 2 years or older
90734	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetravalent), for intramuscular use
90743	Hepatitis B vaccine, adolescent (2 dose schedule)
90744	Hepatitis B vaccine, pediatric/adolescent dosage (3 dose schedule)
90748	Hepatitis B and Hemophilus influenza b vaccine (HepB-Hib)
Q2035	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Afluria)
Q2036	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (FluLaval)
Q2037	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluvirin)
Q2038	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Fluzone)
Q2039	Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use (Not Otherwise Specified)

Note: You may only bill for administration services if performed by, or under the direct supervision of, a reimbursable professional (i.e. physician, mid-level). All administration of VFC vaccines must be billed on a CMS 1500 at no charge (\$.00) for the VFC supplied vaccine and the administration should have the appropriate modifier (SL) to be reimbursed for the federal mandated administration rate of \$14.13. (See <u>fee schedule</u>.). For provider based clinics, VFC services must be billed as a non-provider based service on a CMS 1500 only. The charge for administration of vaccines is a bundled service for outpatient hospitals.

Note: If a significant separately identifiable Evaluation and Management service (e.g., office or other outpatient services, preventive medicine services) is performed, the appropriate E/M service code (with the appropriate modifier) should be reported in addition to the vaccine and toxoid administration codes.

Note: Administration code 90460 (VFC) may have multiple units per line as the code can be used for all VFC. Codes 90471, 90472, 90473, 90474 define route of administration. A combination of these two sets for the same date of service, recipient, and provider will result in a Correct Coding Initiative (CCI) denial with or without a CCI modifier because Codes 90471, 90472, 90473, and 90474 are components codes to Codes 90460 and 90461.

Contact Information

For claims questions or additional information, contact Provider Relations:

Provider Relations toll-free in- and out-of-state: 1-800-624-3958 Helena: (406) 442-1837 E-mail: MTPRHelpdesk@ACS-inc.com

Visit the Provider Information website:

http://medicaidprovider.hhs.mt.gov